## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

PTO - 1360 (REV. 11/04)

SERIAL NO.

FILING DATE

10/533960 PRICANTO

**CLAIMS** 

	AS F	ILED		FER		TER ndment
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
3						
4					:_	-
5						
6						
7						
8						
9						ļ
10						
11						
12						<del> </del>
13						<del> </del>
14 15		<del>                                     </del>				<del>                                     </del>
16	<del></del>					<del>†                                      </del>
17				<del> </del>	-	
18						
19						
20						
21				<u> </u>		<b> </b>
22						
23	<b></b>					
24				<del> </del>		<del> </del>
25			<del> </del>	<del> </del> -	ļ	<del>                                      </del>
26	<u> </u>	ļ		<del> </del>	<del> </del>	<del>                                     </del>
27	<del> </del>	<del> </del>	<del></del>	<del>                                     </del>	1	+
28	<del> </del>	-		<del>                                     </del>	1	1
29 30	<del> </del>	<del> </del>	<del>                                     </del>	1	<del>                                     </del>	
31	1	<del>                                     </del>	1-		<u> </u>	1
32	<del>                                     </del>	1	1	1		
33	1	<del>                                     </del>	1	1		1
34	<del>                                     </del>	<del> </del>	<b>1</b>	<del>                                     </del>		T
35	1		1			
36	<b>1</b>					
37	L					
38						
39.					<u> </u>	<del>                                     </del>
40		<u> </u>	1	<del>  </del>	1	
41	1	<del> </del>	<b>1</b>		-	
42	1	<del> </del>	1	-	<del> </del>	
43		<del> </del>	<del> </del>	<del>                                     </del>	1	
44	<del> </del>		<del>-</del>	+	<del> </del>	+
45	<del> </del>	<del> </del>	1-	+	1	+
46	+		1		1-	
47		+	1			
48	+			11/2	1	
50	1	+		1		
TOTAL INI		1		1		1
TOTAL DE	,22	<b>4</b>		+		+
TOTAL	25	1	3		3	